

DRAFT Core Services and Outcomes Table: Adult Mental Health Services

The following table shows potential, minimum Core Service Domains, Core Services and Outcome Measures. Several outcome measures are applicable in multiple Core Service Domains. Specific measures and data collection mechanisms should be determined for each outcome measure.

Core Service Domain	Core Service	Outcome Measures for Domain
<u>Acute Care Services</u>	<ol style="list-style-type: none"> 1. Mental Health Institutes 2. Inpatientⁱ 3. 23 hour crisis stabilization beds 4. Psychiatric Emergency Screening/24 hour Hotline and face to faceⁱⁱ 5. Crisis Residential (sub-acute)ⁱⁱⁱ 6. Mobile Screening^{iv} 	Clinical Status and Level of Functioning Consumer Satisfaction Consumer Empowerment Inpatient Admissions Inpatient Admissions Diverted Safety Individualized/Person Centered Seclusion and Restraints Trauma-informed Care
<u>Treatment Services</u>	<ol style="list-style-type: none"> 1. Outpatient Services <ul style="list-style-type: none"> - Individual - Group - Family 2. Medication Management 3. Partial Hospitalization/Day Treatment 4. Assertive Community Treatment (ACT) 5. Residential Services^v <ul style="list-style-type: none"> - Supportive Housing - Supportive Housing with up to 24 hour support 6. Community Support Services^{vi} <ul style="list-style-type: none"> - Case Management - Community Support Services (CSS) - Supportive Community Living (SCL) 7. Projects for Assistance in Transition from Homelessness (PATH) 8. Family Psycho-education 9. Peer Delivered Services^{vii} 	Clinical Status and Level of Functioning Consumer Satisfaction Consumer Empowerment Substance Abuse Quality of Life Recovery ADLs Housing Status and Tenure Social Supports Social Inclusion Access to Services Coordination of Services Cultural Competence Safety Trauma-informed Care

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	10. Integrated Psychiatric Rehabilitation	
<u>Recovery Support Services</u>	<ol style="list-style-type: none"> Peer Support <ul style="list-style-type: none"> Self-help Hired as Staff in all Mandated Programs Peer Navigators Peer Wellness Coaches Recovery Support Coaching Supported Employment^{viii} Supported Education Transportation Temporary Rental Assistance Consumer Operated Warm Line 	Clinical Status and Level of Functioning Consumer Satisfaction Consumer Empowerment Substance Abuse Quality of Life Recovery ADLs Housing Status and Tenure Social Supports Social Inclusion Access to Services Coordination of Services Cultural Competence Employment Education Safety
<u>Prevention Services</u>	<ol style="list-style-type: none"> Screening and Assessment in Primary Care settings Mental Health First Aid Psychological First Aid Health Education/Promotion/Stigma activities 	Access to Primary Care Care Coordination Awareness
<u>Health and Primary Care Services</u>	<ol style="list-style-type: none"> Health Homes^{ix} General Health Screenings and Physical Health Promotion in Mental Health Settings General Mental Health Screenings and Promotion in Primary Care Settings Psychiatric On-call Consultants for use 	Improved Physical Health Care Coordination Clinical Status and Level of Functioning Consumer Empowerment Substance Abuse Quality of Life Recovery

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	by Primary Care Physicians ^x 5. Specialty Care On-site or Coordinated	ADLs Access to Services Cultural Competence
<u>Justice Involved Services</u>	1. Crisis Intervention Teams (Police) 2. Jail Diversion	Recidivism Jail/Prison Time Engagement upon Release Number of Police Trained in CIT

Notes:

ⁱ Inpatient Care provided at acute care hospitals. Beds should be available in each Region.

ⁱⁱ PES operated within an Emergency Department to work with doctors in the civil commitment process. 24 hotline may be operated out of the ED, Regionally, or locally through CMHC or other provider. To Be Discussed.

ⁱⁱⁱ Crisis Residential to be operated within each Region.

^{iv} Mobile Screening is a mechanism to divert from hospitalization and/or to facilitate civil commitment process with PES. May be operated from an ED or local provider such as CMHC or other.

^v As a Core Service, Residential programs should be consistent with Supportive Housing principles – meaning housing is not contingent upon compliance with medication or other treatment. Leases should be considered. RCF are not considered a Core Service.

^{vi} Community Support Services encompasses Case Management, CSS, SCL and Supportive Housing. Services can be provided by an individual worker or from a team approach.

^{vii} Peer workers should be hired in all Core Services.

^{viii} Sheltered Workshops are not considered a Core Service.

^{ix} Health Homes: Health Home model may be applied throughout all of the Domains and Core Services, particularly for individuals who most frequently use acute care mental health and primary care services (i.e. top 5% of users).

^x Statewide or Regional program can be established to provide Primary Care Physicians access to consulting services from Psychiatrists.